

<i>SERFF Tracking Number:</i>	<i>STLH-125741131</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Mutual Automobile Insurance Company</i>	<i>State Tracking Number:</i>	<i>40406</i>
<i>Company Tracking Number:</i>	<i>2009 AR ER STD</i>		
<i>TOI:</i>	<i>MS05I Individual Medicare Supplement - Standard Plans</i>	<i>Sub-TOI:</i>	<i>MS05I.001 Plan A</i>
<i>Product Name:</i>	<i>Standardized Medicare Supplement</i>		
<i>Project Name/Number:</i>	<i>2009 AR ER Std/</i>		

Filing at a Glance

Company: State Farm Mutual Automobile Insurance Company

Product Name: Standardized Medicare Supplement SERFF Tr Num: STLH-125741131 State: ArkansasLH

TOI: MS05I Individual Medicare Supplement - Standard Plans SERFF Status: Closed State Tr Num: 40406

Sub-TOI: MS05I.001 Plan A Co Tr Num: 2009 AR ER STD State Status: Approved-Closed

Filing Type: Rate Co Status: Reviewer(s): Stephanie Fowler

Authors: Jane Ann Long, Barb

Baxter, Emily DeWald, Wei Hao Disposition Date: 10/29/2008

Date Submitted: 10/01/2008 Disposition Status: Approved

Implementation Date Requested: Implementation Date:

State Filing Description:

General Information

Project Name: 2009 AR ER Std

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 10/29/2008

State Status Changed: 10/29/2008

Corresponding Filing Tracking Number:

Filing Description:

Re: State Farm Mutual Automobile Insurance Company, NAIC# 176-25178

Annual Rate Filing for Standardized Medicare Supplement Policy Forms 97037, 97038, and 97039

Status of Filing in Domicile: Authorized

Date Approved in Domicile: 07/23/2008

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Deemer Date:

Dear Sir or Madam:

SERFF Tracking Number:	STLH-125741131	State:	Arkansas
Filing Company:	State Farm Mutual Automobile Insurance Company	State Tracking Number:	40406
Company Tracking Number:	2009 AR ER STD		
TOI:	MS051 Individual Medicare Supplement - Standard Plans	Sub-TOI:	MS051.001 Plan A
Product Name:	Standardized Medicare Supplement		
Project Name/Number:	2009 AR ER Std/		

On behalf of State Farm Mutual Automobile Insurance Company of Bloomington, Illinois, I submit the following annual rate filing for the above referenced Standardized Medicare Supplement policy forms.

We are filing rate tables for Policy Forms 97037, 97038, and 97039. This filing represents no change in rates. These rates apply to new issues and renewals. This filing complies with all applicable minimum loss ratio standards.

The following are included with this filing:

- an actuarial memorandum including an actuarial certification
- current rate tables
- experience exhibits
- 10-year projections
- EFT has been submitted in the amount of \$150.00 to pay filing fees

Sincerely,

Emily DeWald, FSA, MAAA
Actuarial Analyst III
Phone no.: (309) 766-3343
Fax no.: (309) 766-1827
Email: emily.dewald.sbf3@statefarm.com

Company and Contact

Filing Contact Information

Emily DeWald, Actuarial Analyst III	Emily.DeWald.SBF3@statefarm.com
One State Farm Plaza	(309) 766-3343 [Phone]
Bloomington, IL 61710	(309) 766-1827[FAX]

Filing Company Information

State Farm Mutual Automobile Insurance	CoCode: 25178	State of Domicile: Illinois
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SERFF Tracking Number: STLH-125741131 State: Arkansas
Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 40406
Company Tracking Number: 2009 AR ER STD
TOI: MS05I Individual Medicare Supplement - Sub-TOI: MS05I.001 Plan A
Standard Plans
Product Name: Standardized Medicare Supplement
Project Name/Number: 2009 AR ER Std/

Company

One State Farm Plaza
Life/Health Actuarial, B-1
Bloomington, IL 61710
(309) 766-5188 ext. [Phone]

Group Code:

Group Name:
FEIN Number: 37-0533100

Company Type:

State ID Number:

SERFF Tracking Number: STLH-125741131 State: Arkansas
Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 40406
Company Tracking Number: 2009 AR ER STD
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: Standardized Medicare Supplement
Project Name/Number: 2009 AR ER Std/

Filing Fees

Fee Required? Yes
Fee Amount: \$150.00
Retaliatory? No
Fee Explanation: 3 policies @ \$50.00 each
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
State Farm Mutual Automobile Insurance Company	\$150.00	10/01/2008	22850064

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<i>Company Tracking Number:</i>	<i>2009 AR ER STD</i>		
<i>TOI:</i>	<i>MS05I Individual Medicare Supplement - Standard Plans</i>	<i>Sub-TOI:</i>	<i>MS05I.001 Plan A</i>
<i>Product Name:</i>	<i>Standardized Medicare Supplement</i>		
<i>Project Name/Number:</i>	<i>2009 AR ER Std/</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Stephanie Fowler	10/29/2008	10/29/2008

SERFF Tracking Number:	STLH-125741131	State:	Arkansas
Filing Company:	State Farm Mutual Automobile Insurance Company	State Tracking Number:	40406
Company Tracking Number:	2009 AR ER STD		
TOI:	MS051 Individual Medicare Supplement - Standard Plans	Sub-TOI:	MS051.001 Plan A
Product Name:	Standardized Medicare Supplement		
Project Name/Number:	2009 AR ER Std/		

Disposition

Disposition Date: 10/29/2008

Implementation Date:

Status: Approved

Comment: We have approved the requested rate filing.

Company Name:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):	Overall % Indicated Change:
State Farm Mutual Automobile Insurance Company	0.000%	\$		\$	%	%	0.000%

SERFF Tracking Number: STLH-125741131 State: Arkansas

Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 40406

Company Tracking Number: 2009 AR ER STD

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: Standardized Medicare Supplement

Project Name/Number: 2009 AR ER Std/

Item Type	Item Name	Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved	No
Supporting Document	Experience Exhibits	Approved	No
Supporting Document	10-year Projections	Approved	No
Rate	Standardized Medicare Supplement	Approved	Yes

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Project Name/Number:	2009 AR ER Std/		

Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Neutral
Overall Percentage of Last Rate Revision:	3.200%
Effective Date of Last Rate Revision:	01/01/2008
Filing Method of Last Filing:	SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):
State Farm Mutual Automobile Insurance Company	0.000%	0.000%				%	%

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Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved	Standardized Medicare Supplement	97037, 97038, 97039	Other		AR Rates - Std 2009 - current.pdf

State Farm Mutual Automobile Insurance Company
Bloomington, Illinois

Medicare Supplement Policy Forms 97037, 97038 and 97039
Annual Premiums
Individual Male or Female

Current Rates (01/01/08 Effective Date)

	Plan A Form 97037 <i>ER_C1434</i>	Plan C Form 97038 <i>ER_C2163</i>	Plan F Form 97039 <i>ER_C2185</i>
All Ages	1,434.00	2,163.00	2,185.00

Semiannual Mode: 51% Annual
Quarterly Mode: 26% Annual

Arkansas